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7278 7590 05/27/2005

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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/644,143	08/20/2003	Connie Sanchez	5432/1J951US4	6480

TITLE OF INVENTION: TREATMENT OF NEUROTIC DISORDERS

08/30/2005 MBELETE2 00000005 10644143

01 FC:1501 1400.00 OP
02 FC:1504 300.00 OP

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	08/29/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
KRASS, FREDERICK F	1614	514-469000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

H. Lundbeck A/S

Valby-Copenhagen, Denmark

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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Authorized Signature Jay P. Lessler
Typed or printed name Jay P. Lessler

Date 8/26/05
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